The British Medical Association has long been concerned with the health of children and young people. The BMA's Board of Science has produced a number of health promotion publications on this group, including *Growing up in Britain* (1999), *Eating disorders, body image and the media* (2000), *Adolescent health* (2003), *Preventing childhood obesity* (2005) and *Child and adolescent mental health* (2006).

We would like to submit the following evidence to the committee's inquiry:

1. **How children and adolescents potentially at risk of developing mental health problems are identified and how those problems should be prevented.**

Certain groups of children and adolescents are at greater risk of suffering from mental health problems. Socio-economic factors play a significant role, and there is a higher prevalence of mental health problems among children from deprived backgrounds. Black and minority ethnic (BME) groups also tend to have higher rates of mental health problems as they are more likely to experience risk factors including deprivation, discrimination and poor educational and employment opportunities. Looked after children (i.e. children in the care of local authorities) are at particular risk, as are refugee and asylum seeker children, and young offenders.

In order to try and prevent children and adolescents in these groups from developing mental health problems, we would make the following recommendations:

- The reforms outlined in the Child Poverty Review must be implemented to end child deprivation and therefore reduce risk factors for mental health problems.
- Current inequalities experienced by BME groups must be tackled:
  - healthcare professionals and providers of child and adolescent mental health services (CAMHS) should receive training in cultural values and beliefs, to enable them to care for children and young people from BME backgrounds more effectively
  - language translation services should be available.
- Barriers to receiving care faced by asylum seeker and refugee children must be addressed.
- The provision of mental health services to looked after children and young people must be improved. CAMHS professionals and registered carers need training in order to support these groups in their particular needs.
- Actions must be taken to improve access to mental health services in young offender institutions, and to tackle the high rate of suicide among young offenders.
- The provision of appropriate mental health services to 16 and 17 year olds must be improved.
- The current inadequacy of services for children and young people with learning disabilities must be addressed.
2. What obstacles there are in identifying children and adolescents with mental health problems and how they might be overcome.

Children and young people face a number of barriers to receiving appropriate mental healthcare. These can be practical, for example, the location of services may make them inaccessible to young people. Service provision needs to be flexible and innovative in order to reach young people, with a diverse range of venues and styles of service that reflect the different needs of individuals. A holistic approach, supporting the young person and their family beyond their mental health problems can also be effective. It can be helpful to combine CAMHS with other services aimed at young people, such as general medical and sexual healthcare, thus potentially reducing the stigma attached to mental health services. Further, young people often access healthcare for a reason other than the main problem, which may then become clear later. There are also problems with long waiting times for appointments, which can discourage young people from attending.

Barriers can also be social and psychological. Evidence suggests that there is a lack of understanding among young people as to what mental health is: they view it as a serious illness or ‘madness’, and as such, not applicable to them. More focused information needs to be provided, targeted specifically at young people, explaining what mental health is and how and where to find help. Parents also need information and support to help their child receive treatment. There is stigma attached to mental health problems, which can result in an unwillingness to admit a problem or ask for help from peers, parents or professionals. Young people may have difficulty building up the courage to seek treatment. They can be wary of mental health professionals, and it can take time for a sufficient level of trust to grow to allow the patient to relax and open up. Young people need to feel respected and listened to by health professionals, not judged. They also strongly value confidentiality, and there needs to be support available to help them through treatment. It is also important that they receive consistency of care and do not have to repeat their story to different professionals, and that there is after-care support where necessary. CAMHS need to take account of what young people say they want, and balance this with what they can realistically provide. Many of the health inequalities discussed in question one can act as barriers to receiving care, such as the difficulties faced by young people from BME groups, refugees and asylum seekers, and looked after children.

We would recommend that:

- Innovative services are needed to meet the needs of young people, and access to such services must be improved. Examples include a range of venues that differ from the traditional clinical setting, and easy access to a mixture of services.
- The media should be encouraged to portray those with mental health problems in a positive light, including children and young people.
- Strategies to address stigma and discrimination against those with mental health problems have been implemented in recent years in
3. **What action is being taken to facilitate early intervention and what else can be done.**

We have no comments on this question.

4. **How access to services and ongoing support can be improved.**

The government has recognised the importance of mental wellbeing among children and adolescents, and the need to improve services for those with mental health problems. As CAMHS encompasses all services working with children, including health, social care and education, all professionals within these services must work together to ensure an effective multidisciplinary approach is achieved and that individuals do not slip through gaps in provision.

The BMA recommends that:

- The government must address the current shortage of mental healthcare professionals.
- There must be adequate funding for CAMHS to ensure that they are properly resourced and staffed.
- All professionals providing CAHMS must receive adequate training and support to enable them to work together effectively. The Government must ensure that the resources and funding are available to allow this to happen.

5. **What problems there are around transition from CAMHS to adult mental health services and how a smoother transition may be achieved.**

All professionals providing mental health services must work together to ensure that all young adults receive the care and treatment they need appropriate to their age.

We would recommend that:

- The provision of appropriate mental health services to 16 and 17 year olds must be improved. Young people should not be receiving adult care when they are not mature enough to do so. CAMHS should be extended to encompass this age group in all areas.
- Collaboration between CAMHS and AMHS must continue and improve to ensure a smooth transition to adult services.

The information and recommendations in this submission have been taken from the BMA’s report *Child and adolescent mental health (2006)*. This report can be accessed on the BMA’s website at www.bma.org.uk

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